



CHARLOTTE-MECKLENBURG POLICE DEPARTMENT
~PASSENGER VEHICLES for HIRE UNIT~

**COMPANY OPERATING CERTIFICATE
APPLICATION CHECKLIST**

Submit a complete application packet consisting of the following payments and enclosures.

INCOMPLETE APPLICATIONS, DOCUMENTS AND ENCLOSURES WILL NOT BE ACCEPTED. (Cash, Money Order, or Company Check ONLY)

1. **\$475 Company Operating Certificate Fee** (NONREFUNDABLE)
2. **Company Operating Certificate Application** (completed, signed and dated) that includes:
 - A. Owner/Management Staff Information Form (separate form for each principal and management staff)
 - B. Financial Statement Affidavit Form (signed by each owner and notarized)
 - C. Driver Summary Form (List ALL drivers)
 - D. Vehicle Summary Form (List ALL vehicles)
 - E. Taxicab Layout/Color Scheme Form (For Taxicab Companies ONLY). DO NOT paint any vehicle until the color scheme and layout have been approved in writing by the PVH Manager.
 - F. (For New Company Applications Only) Authority For Release Form
3. **Rate Schedule** based on hourly charges to be kept on file with the passenger vehicles for hire office (All Non-metered Companies).
4. **(For New Company Applications Only)** Certified copy of articles of incorporation, partnership agreement or association by-laws, if applicable.
5. **(For New Company Applications Only) Criminal Records** (*Only If asked to provide, all court records must come from the respective Clerk of Criminal Court offices in the STATE (Not city or county) (outside North Carolina) Faxed and Internet copies will not be accepted.
6. **(For New Company Applications Only) Driver's License(s)**
7. **(For New Company Applications Only) Social Security Card(s)** (Remember, your Social Security Card must have your signature on it for it to be a valid document.)
8. **(For New Company Applications Only) Immigration Documents (If Applicable)** (Certificate of Naturalization, Passports with INS 551 Stamps, I-9 Card with necessary work authorization stamp, Employment Authorization Card or Permanent Resident Card (Green Card).) **You may also need to provide a criminal history from your country of origin **Only If asked to provide.****
9. **(For New Company Applications Only) Fingerprint Card(s)** (1 completed card per owner/manager). Fingerprint cards may be obtained from the Mecklenburg County Sheriff's Dept. The purpose of the card should read "PVH Permit."
10. All non-metered for-hire transportation companies are required to have For Hire "Z" plates for all vehicles. Metered transportation companies (taxicabs) are required to have commercial "Taxi" tags.

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11. All businesses utilizing private plates must be exclusively human service transport. Those companies shall provide a copy of your DSS or CMS Contract for the upcoming year.

Once we review your company application and conduct a preliminary background investigation, your company will be approved or denied. You will be contacted by phone, whether your application is approved or denied. If your application is denied, you will also receive a written notification of denial.

After approval, you will need to pay the fee for the Company Operating Certificate. After receiving your certificate, you should immediately begin to submit applications for driver permits and vehicle permits (in that order).

Company operating certificates must be renewed annually. In certain situations, when applying for a Company Operating Certificate renewal, you may be asked to provide some of the above items labeled "for new company applications only". All taxicab company operating certificates expire each year at midnight, July 31st. All other passenger-vehicle-for-hire company operating certificates expire annually at midnight, August 31st.

Copies of this checklist, all applications and enclosures are available online at:
<http://charmeck.org/city/charlotte/CMPD/response-areas/SpecialEvents/TaxiandPassengerVehiclesforHire/Pages/default.aspx>

The Passenger Vehicle for Hire Office conducts all business by appointment ONLY:
Monday through Thursday, 8:00 AM -11:00 AM, and 1:00 PM - 4:00 PM.
Friday, 8:00 AM -11:00 AM



CHARLOTTE-MECKLENBURG POLICE DEPARTMENT
~PASSENGER VEHICLES for HIRE UNIT~
COMPANY OPERATING CERTIFICATE APPLICATION

Company Name:			Date:	
Street Address:		City:	State:	Zip:
Mailing Address (if different):		City:	State:	Zip:
Company Email Address:			Primary Contact Person:	
Work Phone:		Cell Phone:	Fax Number:	
Application Type				
Check One:	<input type="checkbox"/> New <input type="checkbox"/> Renewal			
Check One:	<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Association <input type="checkbox"/> Corporation			
Check One:	<input type="checkbox"/> Taxi <input type="checkbox"/> Limousine/Sedan <input type="checkbox"/> Non-Metered <input type="checkbox"/> Shuttle Van <input type="checkbox"/> Para-Transit <input type="checkbox"/> Contract			
Operation of a passenger vehicle for hire in the City of Charlotte is governed by Chapter 22 of the Charlotte City Code. Applicants shall read and understand all requirements in Chapter 22 prior to applying for a company operating certificates.				
Certification and Authorization				
I (we), the undersigned applicant(s), certify that I (we) submit this application in accordance with the provisions reflected in charlotte city code, chapter 22, passenger vehicles for hire. I (we) further certify that: I am (we are) currently in compliance with and will continue to comply with all requirements contained in the Passenger Vehicle for Hire Ordinance. All information contained in this application, including all attachments and enclosures, is true, accurate and complete to the best of my (our) knowledge. For taxicab company applicants: I (we) own a lawfully-zoned depot or terminal on private property. I (we) understand that submitting false, incomplete, or misleading information in the application is unlawful, and shall be grounds for denial, suspension or revocation of the Company Operating Certificate.				
Owner 1		Owner 2		
Print Name: _____		Print Name: _____		
Signature: _____		Signature: _____		
Date: _____		Date: _____		
Owner 3		Owner 4		
Print Name: _____		Print Name: _____		
Signature: _____		Signature: _____		
Date: _____		Date: _____		

INTERNAL USE ONLY		
<input type="checkbox"/> Fee <input type="checkbox"/> Application <input type="checkbox"/> Owner/Management Info Form(s) <input type="checkbox"/> Financial Statement Affidavit Form	<input type="checkbox"/> Driver Summary Form <input type="checkbox"/> Vehicle Summary Form <input type="checkbox"/> Taxi Layout/Color Scheme Form <input type="checkbox"/> Authority For Release Form <input type="checkbox"/> DSS/CMS Contract (If Applicable)	<input type="checkbox"/> Rate Schedule <input type="checkbox"/> Fingerprint Card(s) <input type="checkbox"/> Criminal Records (If Applicable) <input type="checkbox"/> ID's
Approved/Disapproved Issue Date: _____ Date of Expiration: _____		PVH Manager: _____
Reason if Disapproved: _____		



CHARLOTTE-MECKLENBURG POLICE DEPARTMENT
PASSENGER VEHICLES FOR HIRE UNIT

Company Owner/Management Staff Information

(Complete for each principal or manager)

PLEASE PRINT

Company Name:		Company Owner / Manager Name:	
Home Phone: Email:		Cell Phone: Fax Number:	
<p>1. Provide the following information for each owner or manager of the prospective company. If the owner is a corporation, partnership, or association, provide a separate form for each officer, director or partner. Attach additional sheets as necessary to provide all requested information for each individual.</p> <p>2. Individuals must document all addresses for the past five years. Please provide addresses and number of years at each address to account for the past 5 years of residence.</p>			
Applicant Name	Social Security Number	Driver License Number and State	Date of Birth
Address Information: (Street, City, State, ZIP)			Number years at address:
Criminal History. Provide date(s), location(s), and disposition(s) of ALL arrests, convictions, incarcerations, probationary sentences, or traffic citations OF ANY KIND. Attach separate sheet(s) to provide full documentation of all past civil and criminal activity, INCLUDING ALL OUT-OF-STATE activity.			
o NONE (Court statement of no record attached)		o YES (Full documentation attached)	
Remarks:			
Applicant's Signature:			Date:

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**CHARLOTTE-MECKLENBURG POLICE DEPARTMENT
PASSENGER VEHICLES FOR HIRE UNIT**

FINANCIAL STATEMENT AFFIDAVIT

Company Name:			
Business Address:		City:	State: Zip:
I (We), being first duly sworn, state that I am (we are) authorized to make this affidavit on behalf of the above named company and do hereby certify that the above named company has sufficient funds to operate the minimum number of vehicles set forth in section 22-62(d). Additionally, I (we) verify that I am (we are) not currently a named party to any bankruptcy proceeding and that I (we) have not been a named party to a bankruptcy proceeding within seven years prior to the certificate application date.			
ASSETS		LIABILITIES	
Bank Accounts shall be opened at least 30 days as of application date. DO NOT LIST ACCOUNT #s		Describe each liability (notes, loans, mortgages, unpaid taxes)	
	\$		\$
	\$		\$
CASH	\$		\$
OWNED AUTOS	\$		\$
TOTAL ASSETS	\$ 1	TOTAL LIABILITIES	\$ 2
TOTAL NET WORTH (Total Assets Less Total Liabilities)		\$ 3	
ADD EARNED INCOME (Your salary, commissions, fees, etc., from <u>last full tax year</u>)		\$ 4	
NET WORTH WITH INCOME		\$ 5	
I certify that all statements and figures reflected above are true and accurate to the best of my knowledge. I certify that there are no judgments, unsatisfied liens, or pending suits against me, or my company (other than those listed). I submit this statement and information to the Charlotte-Mecklenburg Police Department for the purpose of obtaining a Company Operating Certificate as outlined within the Charlotte City Code, Chapter 22, Passenger Vehicles for Hire. <i>"DOCUMENT MUST BE SIGNED AND NOTARIZED"</i>			
Owner 1		Owner 2	
Signature/Date _____		Signature/Date _____	
Printed Name _____		Printed Name _____	
Owner 3		Owner 4	
Signature/Date _____		Signature/Date _____	
Printed Name _____		Printed Name _____	

Sworn to and subscribed before me
this the ____ day of _____, 20____.

Notary Public
My commission expires:



CHARLOTTE-MECKLENBURG POLICE DEPARTMENT
PASSENGE VEHICLES FOR HIRE UNIT
AFFILIATED DRIVER SUMMARY

	DRIVER NAME	DRIVER LICENSE NUMBER AND STATE	DRIVER PERMIT NUMBER	PERMIT EXPIRATION DATE
PLEASE PRINT List all driver. Alternate forms (spreadsheet, word document) <u>will not be accepted.</u>				
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
Reproduce additional copies of form to document all drivers.				
COMPANY NAME:		SIGNATURE:		DATE:



CHARLOTTE-MECKLENBURG POLICE DEPARTMENT
PASSENGER VEHICLES FOR HIRE UNIT

AFFILIATED VEHICLES SUMMARY

	COMPANY VEHICLE NUMBER	NC TAG NUMBER	VIN	VEHICLE OWNER NAME	COPY OF INSURANCE ON FILE (YES/NO)	INSURANCE VERIFIED BY COMPANY OWNER(S) (YES/NO)
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PLEASE PRINT List all affiliated vehicles, company and independently owned. Alternate forms (spreadsheet, word document) **will not be accepted.**

1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						

Reproduce additional copies of form to document all vehicles.

COMPANY NAME:	SIGNATURE:	DATE:
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**CHARLOTTE-MECKLENBURG POLICE DEPARTMENT
PASSENGER VEHICLES FOR HIRE UNIT**

TAXICAB LAYOUT / COLOR SCHEME

Company Name:		Date:
<p>All vehicle color schemes shall be approved by the PVH Manager BEFORE any vehicle is painted.</p> <p>Attach a full color diagrammatic layout of a representative vehicle and include paint swatches of all proposed colors.</p>		
	Primary Color	Secondary Color(s) <small>(if applicable)</small>
Hood		
Roof		
Trunk Lid		
Sides		
Lettering		

AUTHORITY FOR RELEASE OF INFORMATION

"NATIONAL RECORD CHECK"

I authorize the North Carolina Department of Justice through the **State Bureau of Investigation**, Special Operations Division to perform a fingerprint search of the State's criminal history record file and a Fingerprint search of the **Federal Bureau of Investigations**' files for a national criminal history record check in connection with my application for taxi driver license with the **Charlotte-Mecklenburg Police Department** Pursuant to N.C.G.S. 160A-304 and ordinance.

(Type or Print legibly)

_____	_____	_____	_____
Last Name	First	Middle	Maiden
____/____/____	_____	Male _____	Female _____
Date of Birth	Race		

I understand that the North Carolina State Bureau of Investigation, Special Operations Division, the Federal Bureau of Investigation, and its officials and employees shall not be held legally accountable in any way for providing this information to the above named agency, and I hereby release said agency and persons from any and all liability which may be incurred as a result of furnishing such information. I further understand that the above named agency cannot provide a hard copy of the results of this criminal history record check to me.

Applicant's Signature

____/____/____
Date

Office use only:

The fingerprint card must be accompanied with a transmittal letter from the Authorized Official or Individual requesting Criminal History Record Information. This Authority for Release form must be kept on file for one year.

The request must be mailed to: State Bureau of Investigation, Criminal Information and Identification Section,

Attn.: Applicant Unit, PO Box 29500, Raleigh, NC 27626-0500

ORI # NCO600100-Charlotte-Mecklenburg Police Dept. – Taxi Drivers National Fingerprint Card Check

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